Rye
AC. 44141(1)

1. ~~Mr Muston~~
2. ~~Mr Morley Parry~~
. ~~Mr Perry~~

BOROUGH OF RYE

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ANNUAL REPORT

of the

Medical Officer of Health

for the Year 1968

by

M. I. SILVERTON
O.B.E., T.D., Q.H.P., M.R.C.S., L.R.C.P., D.P.H., F.R.S.H.

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To the Mayor, Aldermen and Councillors
of the Borough of Rye.

I have the honour to present the Annual Report for the year 1968.

I am obliged to the Town Clerk and members of his staff for their assistance in supplying statistics relating to housing and other social services and the Chief Public Health Inspector for those figures relevant to his duties.

It is greatly regretted that the presentation of this report is delayed; unfortunately due to deficiencies in staffing.

I am indebted to the Town Clerk and other Officers for their courtesy and co-operation.

I am grateful to the Mayor, Aldermen and Councillors for their stimulating interest and support.

Your obedient servant,

M. I. SILVERTON

Medical Officer of Health.

The Watch Oak,
BATTLE,
Sussex

Telephone: Battle 2214

BOROUGH OF RYE

PUBLIC HEALTH COMMITTEE
(constitution as at 31st December, 1968)

Chairman:

Alderman M. W. BEEVERS

Vice-Chairman:

Councillor G. SCOTCHER

Councillor P. N. ELLIS, J.P (His Worship the Mayor)

Councillor MRS. B. COPE

Councillor G. E. FERRARI

Councillor W. T. DENNIS

Councillor C. A. JORDON

Councillor R. H. PARRACK

STAFF

Medical Officer of Health:

M. I. SILVERTON, O.B.E., O.St.J., T.D., M.R.C.S., L.R.C.P., D.P.H., F.R.S.H

(also Medical Officer of Health to the Rural District of Battle and School Medical Officer to East Sussex County Council)

Chief Public Health Inspector,
Surveyor and Town Planning Officer:

R. J. CONNOLLY, M.I.P.H.E., C.R.S.I

The staff of the Battle Rural District Public Health Department carry out all the clerical work of the Medical Officer of Health.

STATISTICS RELATING TO THE BOROUGH OF RYE

Area of Borough in acres (estimated). 1,027

Population (Registrar General's estimate for mid-year) 4,240

Analyses of Rateable Values

	1st April, 1968		1st April, 1969	
Domestic properties..	£114,494	60.03%	£116,322	60.14%
Commercial properties	£42,040	22.04%	£42,853	22.16%
Industrial properties	£11,315	5.93%	£11,135	5.76%
Other properties	£22,884	12. 0%	£23,099	11.94%
	£190,733	100%	£193,409	100%

Product of a 1d rate..	£758	£775
Number of rateable properties as at 1st April..	2,254	2,289

VITAL STATISTICS

Mothers and Infants

Live Births

	Male	Female	Total
Legitimate	22	25	47
Illegitimate	6	6	12
	28	31	59

Stillbirths

	Male	Female	Total
Legitimate	0	0	0
Illegitimate	0	0	0
	0	0	0

Illegitimate Live Births (per cent of total live births).. .. .. 20.3

	BOROUGH OF RYE	ENGLAND AND WALES
Live Birth Rate per 1,000 population	14.6	16.9
Stillbirth Rate per 1,000 total live and stillbirths.	Nil	14.3*
Total Live and Stillbirths	59	831,120
Infant Deaths (deaths under one year)	1	14,982
Infant Mortality Rates		
Total infant deaths per 1,000 live births	17.0	18.3
Legitimate infant deaths per 1,000 legitimate live births.. ..	Nil	-
Illegitimate infant deaths per 1,000 illegitimate live births	83.3	-
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	17.0	12.4
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	17.0	10.5
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)	17.0	24.7
Maternal Mortality (including abortion)		
Number of deaths	Nil	396
Rate per 1,000 total live and stillbirths	Nil	0.47

* Lowest rate recorded.

Deaths

Borough of Rye		England and Wales	
Male.. 34	69	Male.. .. 293,251	576,788
Female 35		Female .. 283,537	

Death rate per 1,000 population.. .. 17.1 — 11.9

(Standardised death rate .. .. .. 14.2)

The standardised Birth and Death Rates pay due regard to the increased proportion of aged and retired persons within the Borough as compared with England and Wales, and this is reflected in the increased number of deaths and the comparatively low number of births.

Equalisation is achieved by using a comparability factor which is provided annually by the Registrar General.

(2)

MORTALITY LEVEL

Mortality Data Estimates

Life Expectancy	Male	Female	Total
Expectancy	52	52	52
Estimated	3	3	3
	55	55	55

Life Expectancy	Male	Female	Total
Expectancy	0	0	0
Estimated	0	0	0
	0	0	0

Life Expectancy (Per cent of total Life Expectancy)	2.05	
Life Expectancy (Per cent of total Life Expectancy)		
Life Expectancy Data Estimate	3.41	
Estimated Life Expectancy Data	LM	
Total Life Expectancy Data Estimate	55	
Index Level (Years with Mean one Year)	1	
Index Level Mortality Data		
Total Infant Deaths per 1,000 Live Births	0.71	
Estimated Infant Deaths per 1,000		
Estimated Life Expectancy	LM	
Estimated Infant Deaths per 1,000 Live Births	2.58	
Non-Infant Mortality Data (Deaths under 1 Year per 1,000 Total Live Births)	0.71	
Infant Non-Infant Mortality Data (Deaths under 1 Year per 1,000 Total Live Births)	0.71	
Estimated Mortality Data (Estimated Infant Deaths per 1,000 Live Births)	0.71	
Estimated Mortality (Indicator Equation)		
Number of Deaths	LM	
Data Input 1,000 Total Deaths		
Estimated	LM	

Life Expectancy	Male	Female	Total
Expectancy	14	14	14
Estimated	51	3	3
	65	17	85

Life Expectancy		
Data Estimate		
Total Life Expectancy Data Estimate	55	
Estimated Life Expectancy Data	LM	
Estimated Life Expectancy Data		
Total Life Expectancy Data Estimate	55	
Index Level (Years with Mean one Year)	1	
Index Level Mortality Data		
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Number of Deaths	LM	
Data Input 1,000 Total Deaths		
Estimated	LM	

DETAILED CAUSES OF DEATH

	Sex	Total All Ages	Under 1 Year	1-14	15-24	25-34	35-44	45-54	55-64	65 and over
Enteritis and other Diarrhoeal Diseases	F	1	-	-	-	-	-	-	-	1
Other Infective and Parasitic Diseases	F	1	-	-	-	-	-	1	-	-
Malignant Neoplasm - Stomach	F	1	-	-	-	-	-	-	-	1
Malignant Neoplasm - Lung, Bronchus	M	3	-	-	-	-	-	-	1	2
Malignant Neoplasm - Breast	F	1	-	-	-	-	-	-	-	1
Malignant Neoplasm - Uterus	F	2	-	-	-	-	-	-	2	-
Other Malignant Neoplasms, etc	M	2	-	-	-	-	-	-	1	1
	F	6	-	-	-	-	-	-	1	5
Diseases of Nervous System, etc	F	1	-	-	-	-	-	-	-	1
Hypertensive Disease	M	1	-	-	-	-	-	-	1	-
	F	1	-	-	-	-	-	-	-	1
Ischaemic Heart Disease	M	9	-	-	-	-	-	1	2	6
	F	3	-	-	-	-	-	-	-	3
Other forms of Heart Disease	M	2	-	-	-	-	-	-	-	2
	F	2	-	-	-	-	-	-	-	2
Cerebrovascular Disease	M	9	-	-	-	-	-	-	2	7
	F	9	-	-	-	-	-	-	1	8
Other Diseases of the Circulatory System	M	1	-	-	-	-	-	1	-	-
	F	1	-	-	-	-	-	-	-	1
Pneumonia	M	1	-	-	-	-	-	-	-	1
	F	2	-	-	-	-	-	-	-	2
Bronchitis and Emphysema	M	3	-	-	-	-	-	-	-	3
Intestinal Obstruction and Hernia	F	1	-	-	-	-	-	-	-	1
Other Diseases of Genito-Urinary System	F	1	-	-	-	-	-	-	-	1
Birth Injury, Difficult Labour, etc	M	1	1	-	-	-	-	-	-	-
Motor Vehicle Accidents	M	1	-	-	-	-	1	-	-	-
All other Accidents	M	1	-	-	-	-	-	-	1	-
Suicide and Self-Inflicted Injuries	F	2	-	-	1	-	1	-	-	-
TOTAL ALL CAUSES	M	34	1	-	-	-	1	2	8	22
	F	35	-	-	1	-	1	1	4	28

MAIN CAUSES OF DEATH

	1966	1967	1968
(i) Diseases of the heart and circulatory system	12 (21.0%)	7 (11.1%)	8 (11.6%)
(coronary disease)	7 (12.2%)	10 (15.9%)	12 (17.4%)
(ii) Vascular lesions of the nervous system	10 (17.5%)	10 (15.9%)	18 (26.09%)
(iii) Malignant neoplasms (Cancer of lung and bronchus)	5 (8.7%)	7 (11.1%)	3 (4.3%)
(Cancer all other forms)	18 (31.5%)	15 (23.8%)	12 (17.4%)
(iv) Respiratory diseases (excluding tuberculosis)	7 (12.2%)	5 (7.9%)	6 (8.7%)

DEATHS FROM SPECIFIC CAUSES AND RATES PER 1,000 POPULATION

	Borough of Rye		England and Wales	
	No. of deaths	per 1,000 population	No. of deaths	per 1,000 population
Tuberculosis (respiratory)..	Nil	Nil	1,458	0.03
Bronchitis..	3	0.7	31,002	0.64
Pneumonia (excluding pneumonia of the new born)	3	0.7	41,039	0.84
Acute Poliomyelitis	Nil	Nil	2	0.00
Vascular disease including coronary and heart disease	38	8.9	294,372	6.05
Cancer of the lung and bronchus	3	0.7	28,826	0.59
Cancer, all other forms ..	12	2.8	85,117	1.75
Motor vehicle accidents ..	1	0.23	6,348	0.13
All other accidents	1	0.23	10,268	0.21

It should be appreciated that statistics involving small numbers may give a distorted view when comparisons are made with the England and Wales population.

DEATHS - 65 YEARS OF AGE AND OVER

	Borough of Rye			Greater London		
	1966	1967	1968	1966	1967	1968
Total deaths	57	63	71	87,992	85,285	90,287
No. of deaths 65 years and over	42	49	49	60,122	58,588	63,170
Percentage of total deaths	73.7	77.8	69.0	68.3	68.6	69.9

SUMMARY OF POPULATION, BIRTHS AND DEATHS WITH RATES, 1958-1968

Year	Estimated Population	Total Live Births			Standardised Birth Rate	Birth Rate England & Wales	Total Deaths			Standardised Death Rate	Death Rate England & Wales	Natural Variation
		M	F	Total			M	F	Total			
1958	4,470	25	28	53	12.0	16.4	30	35	65	12.4	11.7	- 12
1959	4,470	31	27	58	13.2	16.5	31	33	64	12.3	11.6	- 6
1960	4,480	34	23	57	12.9	17.1	30	28	58	11.1	11.5	- 1
1961	4,420	27	24	51	11.7	17.4	40	31	71	13.8	12.0	- 20
1962	4,360	26	29	55	12.8	18.0	30	26	56	11.0	11.9	- 1
1963	4,370	31	29	60	16.1	18.2	30	30	60	11.5	12.2	----
1964	4,370	28	27	55	14.8	18.4	28	33	61	11.7	11.3	- 6
1965	4,400	33	24	57	15.2	18.1	22	30	52	10.2	11.5	+ 5
1966	4,400	26	40	66	17.7	18.1	31	26	57	10.8	11.7	+ 9
1967	4,400	29	32	61	16.4	17.2	34	29	63	11.8	11.2	- 2
1968	4,240	28	31	59	17.2	16.9	34	35	69	14.2	11.9	- 10

ACCIDENTS BOTH IN AND OUTSIDE THE HOME

(England and Wales)

	1967			1968		
	Male	Female	Total	Male	Female	Total
Accidental poisoning..	433	580	1,013	421	543	964
Accidental falls	1,687	3,477	5,164	1,788	3,715	5,503
Accidents caused by fire.. ..	288	393	681	337	454	791
Accidental drowning	407	86	493	357	97	454
All other accidents	1,526	665	1,191	1,458	628	2,086
TOTALS	4,341	5,201	9,542	4,361	5,437	9,798

The Department of Health and Social Security has decided to issue a plastic spoon to contain 5 ml of medicine in place of the vague "teaspoonful" of which there are apparently 70 variants in household use.

Patients are requested to:-

Use only the plastic spoon when taking doses, so avoiding over-medication and possible poisoning.

Read the instructions on the medicine bottle carefully.

Shake the bottle, fill the plastic spoon to the brim, and rinse it with hot water after use.

Keep medicines and spoons out of reach of children.

MOTOR VEHICLE DEATHS

England and Wales	Male	Female	Total
1966..	5,293	2,161	7,454
1967..	4,936	2,232	7,168
1968..	4,315	2,033	6,348

There was one death from this cause within the Borough during 1968.

MORTUARY FACILITIES

Available by arrangement with the Hospital Management Committee at Rye Hospital.

The mortuary at the Royal East Sussex Hospital, Hastings, is used whenever possible.

Mouth to Mouth Resuscitation

During the year 1968 practical instruction was given to members of the general public in Rye through the medium of the British Red Cross Society and the St.John Ambulance Brigade.

I am indebted to Mr. R. A. Walker, S.B.St.J., Station Officer, Rye Division, St.John Ambulance Brigade for his personal efforts and interest in making himself available to give these demonstrations in his off duty times.

SMOKING AND DISEASE

Lung Cancer deaths in England and Wales

	1966	1967	1968
Males..	22,605	23,510	23,896
Females	4,414	4,678	4,930
	27,019	28,188	28,826

Most doctors now agree that heavy cigarette smoking gives rise to increased susceptibility to lung cancer, heart disease, chronic Bronchitis with Emphysema and stomach ulcers.

They have apparently taken this lesson to heart, as studies reveal that fifteen years ago doctors smoked slightly less than the general population, whereas now, only 1 in 4 smoke cigarettes and 1 in 5 other tobaccos including some cigarettes.

The death rate for lung cancer in doctors is at present less than two-fifths of the national average and coronary disease deaths have been halved in the 55-64 age group as compared with the rest of the population.

Despite all the evidence produced, cigarette smoking continues to take its toll. One must sadly come to the reluctant conclusion that the smoking habit in the adult addict is irreversible and one's only hope lies in endeavouring to influence the young.

TUBERCULOSIS

	Pulmonary cases			Non-pulmonary cases			Total cases (all forms)		
	M	F	Total	M	F	Total	M	F	Total
1. Number on Register at 1st January, 1968	16	5	21	4	1	5	20	6	26
2. Cases previously removed and re-notified in 1968	-	-	-	-	-	-	-	-	-
3. Primary notifications received in 1968	-	-	-	-	-	-	-	-	-
4. Cases moved into the Borough as transfers in 1968	-	-	-	-	-	-	-	-	-
Totals	16	5	21	4	1	5	20	6	26
5. Cases removed from Register in 1968	2	-	2	-	-	-	2	-	2
6. Number on Register at 31st December, 1968	14	5	19	4	1	5	18	6	24

ANALYSIS OF REMOVALS, 1968

	Pulmonary cases	
	Male	Female
Cured.. ..	1	-
Left District	1	-
	2	-

TUBERCULOSIS PREVENTIVE MEASURES

East Sussex Mass Radiography Unit

Herewith result of the operation of this unit comprising thirteen visits within Rye Borough during 1967 (too late for inclusion in my Annual Report for that year):-

Number Examined		
Male	Female	Total
460	605	1,065
Total Abnormalities		
Male	Female	Total
26	33	59

Mass Miniature Radiography not only discloses early tuberculous lesions but other abnormal conditions of the heart and lungs which are amenable to treatment.

This unit attends every 2nd Tuesday in the month at the Rye Ambulance Station for special cases referred by medical practitioners.

INCIDENCE OF INFECTIOUS DISEASES

Diphtheria and Poliomyelitis

This Borough has been free from Diphtheria and Poliomyelitis for the past 23 years and 15 years respectively.

Importation from abroad is a continuing danger.

Immunisation is the controlling factor in the elimination of these diseases.

Measles

Introduction of Measles Vaccine (freeze dried live attenuated) May, 1968.

Vaccination against measles was initially offered to all children up to and including the age of 15 who had not had the natural disease. The vaccine (one injection) will in future years be given as a routine to children in the second year of life and it is hoped that in this way the infection will ultimately be eradicated. The low incidence in 1968 was probably influenced by this vaccination campaign.

Whooping cough

No incidence for the past three years.

Scarlet fever

Mild in character and of no special significance, no case admitted to hospital. The usual investigations were made in each case regarding the possibility of food handlers being involved, and where indicated, alternative work was advised and accepted.

Hong Kong "flu"

The importation of this variant of the usual influenza virus endemic in this country was noted in mid-August, 1968. Although there was no natural immunity to this new strain, the impact generally was extremely mild, of comparatively short duration and did not at any time assume epidemic proportions.

Paratyphoid B

One case of Paratyphoid B occurred within the adjacent Rural District in a girl aet 7 years following a 15 day holiday spent partly in Torremolinos, Spain and Restinga in Morocco.

She was admitted to hospital four days after her return home because of persistent vomiting. Paratyphoid B was isolated while in hospital. She subsequently made a complete recovery with no evidence of spread of infection.

From the history it would appear likely that this infection was contracted in Morocco.

Administration of T.A.B Vaccine

All persons intending to travel abroad should be vaccinated against typhoid and paratyphoid fevers. This will normally be done by the individual's own doctor. Dosage varies according to age. For primary immunisation two doses should be given at an interval of 4 to 6 weeks followed by a third dose 6 - 12 months after the second. Reinforcing doses at yearly intervals are advocated where the subject is at continued risk.

INCIDENCE OF INFECTIOUS DISEASES
(Continued)

Salmonella Typhi-murium

The ubiquity of salmonella typhi-murium is illustrated by the following unrelated reports within the surrounding rural area:-

(a) Isolated in some dead pheasants sent to Wye College (University of London) from this area for investigation, no evidence of human spread was obtained.

(b) A Siamese cat sent for autopsy. Family contacted, no history of illness, unable to submit samples as they went abroad soon afterwards.

(c) Notification received from a local hospital that a mentally retarded spastic child who had been an in-patient for a month was clinically ill and that salmonella typhi-murium had been isolated from his stools.

Family all submitted samples with negative results with no past history of infection. It was considered that this was a case of hospital infection.

THE PUBLIC HEALTH (INFECTIVE JAUNDICE) REGULATIONS, 1968

These Regulations came into operation on the 15th June, 1968.

A letter (Circular 20/68) dated 5th June, 1968, detailing the reasons for notification was sent to every Medical Practitioner resident or practising within this area.

Infective Jaundice outbreak occurring in a specialised hospital just outside the Borough boundary

The first notification of infective jaundice was received from this Hospital on the 15th November. Ten further notifications were received in December, twenty-one in January, 1969, and finally two cases in February, 1969.

Ages ranged from 2 years to 60 years, 13 males and 21 females.

Two female cases and one male case occurred amongst the 44 nursing staff (10 males and 34 females).

No case reported in the 4 domestic staff members.

This is a hospital caring for the mentally subnormal whose personal hygiene is sketchy at most.

Working on the assumption that the spread of this disease is facilitated by a lack of hygienic principles similar to food borne infections, the main areas of concern were the kitchens, food handlers, personal hygiene, toilets and vermin.

The kitchen standards and procedures were generally satisfactory with some minor physical adjustments which were soon resolved.

The one glaring defect was the method of washing up which was decentralised into ward kitchens and carried out by patients. In view of the subnormality of the patients, the water was not sufficiently hot because of the likelihood of scalding and the wiping cloths were foci of infection.

This situation was not capable of radical alteration in the short term but instructions were given that before patients assisted in washing up or feeding other patients they should wash their hands under nursing supervision, disposable towels were provided and racks used where possible for drying crockery.

Bowls of disinfectant were placed in all wards and the patients dipped their hands on entering. Whether this was effective is problematical but at least it focussed some attention on personal hygiene.

THE PUBLIC HEALTH (INFECTIVE JAUNDICE) REGULATIONS, 1968
(Continued)

A contract with a reputable pest control firm was in being and no infestations were noted or had been recorded.

Main water supply, chemically sampled, did not reveal any abnormal finding. Only pasteurised milk consumed.

On the 17th December I was able to arrange a meeting with those mainly concerned, i.e.the Consultant Psychiatrist, the Medical Officer in Charge, the Administrator, the Nursing Superintendent and the area Public Health Inspector, when it was decided that the admission unit should be closed immediately; this was re-opened on the 16th April, 1969.

A full report was immediately forwarded to the Hospital Management Committee stressing the urgency to centralise all washing up facilities (including the Nurses Home) in the central kitchen in one up-to-date unit.

I am pleased to report that this washing-up unit was eventually fully operational on the 24th April, 1969.

The infective jaundice outbreak was explosive, extremely infectious but apparently not virulent. There were 2 deaths complicated by measles and 2 deaths with Broncho-pneumonia as the prime cause.

A measles outbreak of 35 cases occurred during this same period, resulting in 6 deaths, showing measles as a primary cause.

In this context it must be borne in mind that all these deaths were complicated by severe mental subnormality.

During 1968 and prior to this disease becoming officially notifiable, there were four cases of infective jaundice at this hospital, three staff and one patient.

The two female cases and one male case occurring amongst the nursing staff left the hospital immediately on being diagnosed and returned when fit.

The one male patient aged 7 years admitted with jaundice on 31.1.1968 remained in this hospital's admission unit until 3.4.1968, when he went home; readmitted 18.9.1968 to a general ward still showing residual jaundice which eventually cleared.

I would like to thank the Hospital Management Committee, the medical and administrative staff for their helpful co-operation and courtesy throughout this trying period.

THE PUBLIC HEALTH (INFECTIOUS DISEASES) REGULATIONS, 1968

WITH EFFECT FROM 1ST OCTOBER, 1968

A copy of the above mentioned Regulations and a copy of Sections 47 to 49 of the Health Services and Public Health Act, 1968, were sent to all General Medical Practitioners practising in the Borough.

Section 48 detailed the infectious diseases to be notified to the Medical Officer of Health and a list of six diseases no longer requiring notification are as follows:-

Acute influenzal pneumonia
Acute primary pneumonia
Acute rheumatism
Erysipelas
Membranous croup
Puerperal pyrexia

COMPARATIVE STATISTICS FOR THE YEARS 1963 - 1968

1st January - 31st December

	1963	1964	1965	1966	1967	1968
Scarlet fever..	-	-	4	-	3	2
Measles	6	111	15	32	32	13
* Pneumonia..	2	1	3	4	-	2
* Erysipelas	4	2	-	1	1	3
Whooping cough	31	7	1	-	-	-
Opthalmia neonatorum	-	-	-	1	-	-
Infective jaundice	-	-	-	-	-	1

* Ceased to be notifiable on 1st October, 1968.

SEASONAL INCIDENCE OF INFECTIOUS DISEASES DURING 1968

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT.	NOV	DEC	TOTALS
Erysipelas	-	-	-	-	-	-	-	1	2	-	-	-	3
Scarlet fever	-	-	-	-	-	-	-	-	-	-	-	2	2
Measles	-	-	-	-	-	4	6	1	1	1	-	-	13
Infective jaundice	-	-	-	-	-	-	-	-	1	-	-	-	1
Pneumonia	-	-	-	-	-	-	-	-	2	-	-	-	2
TOTALS	-	-	-	-	-	4	6	2	6	1	-	2	21

CASES OF INFECTIOUS DISEASES IN AGE GROUPS 1968

	Infective jaundice	Pneumonia	Erysipelas	Scarlet fever	Measles	TOTALS
Under 1 year	-	-	-	-	1	1
1 - 2 years	-	1	-	-	7	8
3 - 4 years	-	-	-	1	3	4
5 - 9 years	-	-	-	1	1	2
10 - 44 years	1	-	1	-	1	3
45 - 64 years	-	-	-	-	-	0
65 years and over	-	1	2	-	-	3
TOTALS	1	2	3	2	13	21

[illegible]

[illegible]

[illegible]

PERIOD OF EXCLUSION IN CERTAIN INFECTIOUS DISEASES
MINISTRY OF EDUCATION RECOMMENDATIONS

	Usual Incubation period (days)	Interval between onset and appearance of rash (days)	Patients	Contacts, i.e.the other members of the family or household living together as a family, that is, in one tenement.
SCARLET FEVER AND STREPTOCOCCAL SORE THROAT	1-7	1-2	Re-admit when family doctor permits	Adult contacts engaged in school meals service excluded until Medical Officer of Health allows return to work. Other contacts, if healthy, need not be excluded.
MEASLES	7-14	3-4	10 days after the appearance of the rash if the child appears well.	Children under 5 years of age who have not had the disease should be excluded for 7 days from the date of the appearance of the rash in the last case in the house. Other contacts can attend school. Any contact suffering from a cough, cold, chill or red eyes should be immediately excluded.
GERMAN MEASLES	5-21	0-2	7 days from the appearance of the rash.	None.
WHOOPING COUGH	6-18	-	28 days from the beginning of the characteristic cough.	Children under 7 years who have not had the disease should be excluded for 21 days from the date of onset of the disease in the last case in the house.
CHICKEN-POX	11-21	0-2	7 days from the date of appearance of the rash.	None.
MUMPS	12-28	-	7 days from the subsidence of the swelling.	None.
CONJUNCTIVITIS (INCLUDING PINK EYE)	1-3	-	To be excluded until certified as fit to attend.	None.
RINGWORM OF THE BODY (including ATHLETE'S FOOT)	If the infected area can be kept covered the patient need not be excluded. He should not, however, take part in swimming - nor in the case of ringworm of the feet - in gymnastic classes or barefoot dancing.			

SCHEDULE OF VACCINATION AND IMMUNISATION PROCEDURES

Age	Prophylactic	Interval	Notes
During the first year of life	Diph/Tet/Pert. and oral Polio vaccine (First dose) Diph/Tet/Pert. and oral Polio vaccine. (Second dose) Diph/Tet/Pert. and oral Polio vaccine. (Third dose)	 Preferably after an interval of 6-8 weeks. Preferably after an interval of 6 months.	The earliest age at which the first dose should be given is 3 months, but a better general immunological response can be expected if the first dose is delayed to 6 months of age.
During the second year of life	Measles vaccination Smallpox vaccination	After an interval of not less than 3-4 weeks. After an interval of not less than 3-4 weeks.	While the second year is recommended for routine vaccination against smallpox, in individual cases and if special circumstances call for it, vaccination against smallpox may be carried out during the first year.
At 5 years of age or school entry	Diph/Tet and oral Polio vaccine or Diph/Tet/Polio vaccine Smallpox revaccination		With the exception of smallpox revaccination, these may be given, if desired, at 3 years of age to children entering nursery schools, attending day nurseries or living in children's homes.
Between 10 and 13 years of age	B.C.G vaccine		For tuberculin-negative children
At 15-19 years of age or on leaving school	Polio vaccine (Oral or inactivated) Tetanus toxoid Smallpox revaccination		

Protective inoculations, persons under 16 years of age

	Local Health Authority's Records					
	Completed Primary course			Completed Reinforcing course		
	1966	1967	1968	1966	1967	1968
Diphtheria	58	65	67	102	146	152
Whooping cough	57	64	63	65	65	30
Tetanus..	70	82	68	101	142	169
* Poliomyelitis	-	-	80	-	-	62

* Figures for past years not available.

SMALLPOX VACCINATION

	Local Health Authority's Records					
	Primary			Revaccination		
	1966	1967	1968	1966	1967	1968
Under 1 year	2	3	-	-	1	-
1 year	35	34	19	-	1	-
2 - 4 years..	5	6	9	-	1	3
5 - 15 years	1	1	2	3	4	15
TOTALS	43	44	30	3	7	18

Smallpox

International certificates of vaccination against smallpox authenticated for travel abroad:-

	Primary	Revaccination
1966..	20	305
1967..	10	201
1968..	12	247

Travellers, in their own interests, should not proceed to smallpox areas without making certain that they have obtained a successful result to vaccination or re-vaccination.

GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH

(A) PROVIDED BY THE EAST SUSSEX COUNTY COUNCIL UNDER THE AEGIS OF THE COUNTY MEDICAL OFFICER OF HEALTH

(i)(a) Ambulance Service

RYE Sub-station, Conduit Hill (Telephone Rye 3395) employs 6 men and has 2 ambulances (including 1 dual purpose vehicle for sitting cases) serving the parishes of

Beckley	Iden	Rye Foreign
Camber	Northiam	Rye Harbour
East Guldeford	Peasmarsh	Udimore
Icklesham	Playden	Winchelsea Beach
		Winchelsea Town

in addition to the Borough of Rye.

(b) Hospital Car Service

The Hospital Car Service is provided by the joint organisations of the Women's Royal Voluntary Service, the British Red Cross and the St.John Ambulance Brigade. The Area Transport Office for this district is at 73a, London Road, Bexhill-on-Sea - 9 a.m to 6 p.m, Monday to Friday (Telephone: 152). Emergency service at weekend through Ambulance Station.

(ii) Care of Expectant and Nursing Mothers and Children under School Age

(iii) District Nurses (Midwives) and Health Visitors

(iv) Home Help Service

This service is much appreciated and is of great assistance in avoiding hospitalisation and institutionalism, particularly for those elderly persons desirous of remaining in their homes.

(v) Infant Welfare Centre

The Infant Welfare Centre is held every Thursday at the County Clinic, Ferry Road, Rye.

(vi) Immunisation and Vaccination Service

A clinic is held on the 2nd and 4th Thursdays in every month at the County Clinic, Ferry Road, Rye.

B.C.G vaccination sessions against tuberculosis are held at schools for children aged 13 years attended by an Assistant County Medical Officer.

(vii) Mental Health Service

Mental Health Officers maintain liaison with general practitioners and are available at the following addresses:-

MR. J. G. WILLIAMS, Maple End, Maple Walk, Cooden (Telephone Cooden 2469)

MR. H. C. BEECROFT, 22, Cavendish Avenue, St.Leonards-on-Sea. (Telephone Hastings 6742)

MRS. R. V. LEE, 34, Sackville Road, Bexhill-on-Sea. (Telephone Bexhill 981)

MR. M. G. FORD, 19, Ghyllside Estate, Northiam. (Telephone Northiam 2311)

The Bexhill Area Office is at 54, Sea Road, Bexhill-on-Sea, and the officers meet there between 8.30 and 9.30 a.m, and the clerical staff stay until 5 p.m (Telephone: Bexhill 7071).

The Mental Health Welfare Officer on duty outside office hours, i.e. after 5 p.m., can be contacted through Hellingly Hospital (Telephone Hellingly 391).

GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH
(Continued)

(viii) Registration of Nursing Homes (Nil in the Borough of Rye)

(ix) School Dental Service

(x) School Medical Service (* routine medical examinations including the assessment of handicapped pupils)

* Delegated duties to your Medical Officer of Health, who also acts as School Medical Officer.

(xi) Cervical Cytology

Application forms to attend clinics by appointment may be obtained at the Council Offices, Borough of Rye, Ferry Road, Rye, or from General Practitioners and Health Visitors.

(B) PROVIDED BY THE EAST SUSSEX COUNTY COUNCIL WELFARE DEPARTMENT

Homes for the Aged

Furze House, Flimwell, Ticehurst.
Grey Friars, Winchelsea.

(C) HOSPITALS

The following are the main hospitals providing accommodation and treatment for residents in the Borough of Rye:-

Darvell Hall Hospital, Robertsbridge.
Battle Hospital, Battle.
Memorial Hospital, Rye Foreign.
Royal East Sussex Hospital, Hastings (including V. D. Clinic).
Mount Pleasant Isolation Hospital, Hastings.
St.Helen's Hospital, Hastings.
Fernbank Maternity Home, Hastings.
Buchanan Hospital, St.Leonards-on-Sea.
Eversfield Chest Hospital, St.Leonards-on-Sea.
Hellingly Hospital, Hellingly.
Pembury Hospital, Pembury.
Hill House, Rye Foreign.

Administered by the South-East Metropolitan Regional Hospital Board through their respective Hospital Management Committees.

Blood Transfusion Service

The National Blood Transfusion Service visits Rye periodically.

Stamped addressed leaflets for volunteer donors are available at this Council's offices.

(D) PUBLIC HEALTH LABORATORY SERVICE

The Public Health Laboratory Service is a free national laboratory service designed to assist all those concerned in the diagnosis, prevention and control of communicable diseases. The benefits are not limited by health authority, hospital region or other administrative boundary. These facilities are available to all doctors, both for the submission of specimens and for consultation.

Rubella, Pregnancy and Gamma Globulin

The following procedure will be followed:-

1. A sample of clotted blood from the mother, in a plain tube, will be requested.

2. If the foetus is deemed to be at risk, that is, if the mother is not known to have had rubella, and if there is a definite history of exposure to infection (same room) during the first 16 weeks of pregnancy, the Doctor will be asked to ascertain whether the mother wishes to continue with her pregnancy in the event of her becoming infected with rubella.

/3. When the answer to

GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH

(D) PUBLIC HEALTH LABORATORY SERVICE (Continued)

3. When the answer to 2 is in the affirmative, 750 milligrams of gamma globulin will be issued forthwith.

4. When the blood test shows that the mother is immune (as will often be the case), she can be reassured with regard to this and future pregnancies, when the mother is found to be non-immune, a further sample of her blood will be requested to ascertain whether or not she has become infected with rubella.

Infectious Hepatitis and Gamma globulin	Usual dosage
Susceptible contacts at special risk because an unmodified attack would be likely to have serious effects, e.g.persons already debilitated from some other disease.	Under 11 years, 250 mg. 11 years or more, 750 mg.

Gamma globulin, prepared from pooled plasma from normal healthy adults by the Lister Institute for the Ministry of Health, is distributed to doctors in England and Wales through laboratories of the Public Health Laboratory Service. Requests for supplies, which are restricted, should be made personally to Doctor J. E. Jameson, Director, Public Health Laboratory, Royal Sussex County Hospital, Brighton BN 2 5 BE (Telephone: Brighton 63506).

Other types of vaccines, anti-toxins and sera are not in stock at the Brighton Laboratory, but information may be obtained from the Director.

Vaccinia and Gamma Globulin

Reserved for generalised vaccinia, accidental vaccinal infections endangering the eye, and in special circumstances, for the protection of unvaccinated smallpox contacts.

A small stock of gamma globulin prepared from blood of persons recently vaccinated against smallpox is held and distributed by the Central Public Health Laboratory, Colindale Avenue, London, N.W.9 (Telephone: 01-205 7041).

(E) NATIONAL ASSISTANCE ACT, 1948

(i) Section 47: Removal to suitable Premises of Persons in Need of Care and Attention

Fortunately, I have been able to avoid using this Section during 1968.

(ii) Section 50: Burial or Cremation of the Dead

No action was necessary.

(F) HOME PHYSIOTHERAPY SERVICE

The Home Physiotherapy Service provides qualified physiotherapists with completely equipped vans for the treatment of the incapacitated.

This charitable service, mainly concerned with the elderly, is complementary to the National Health Service hospital physiotherapy department. It provides treatment for those persons who, in the opinion of their hospital consultants or general practitioners, would derive more benefit from domiciliary attention but who cannot afford the services of a private physiotherapist.

(G) NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

Telephone Hastings 1848.

/(H) FAMILY PLANNING ASSOCIATION

GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH
(Continued)

(H) FAMILY PLANNING ASSOCIATION

Designed to advise married people on the spacing and limitation of families, including involuntary sterility and minor gynaecological ailments.

Clinics are held as follows:-

Arthur Blackman Clinic, London Road, St.Leonards-on-Sea.	Every Tuesday, 2.15 to 3.45 p.m. First and third Wednesdays in month 6 to 7.30 p.m. Telephone: Hastings 51225.
The Clinic, The Avenue, Eastbourne.	Every Monday, 2.30 to 4.0 p.m. By appointment only. Every Thursday, 2.30 to 4.0 p.m and 5.30 to 7.0 p.m. Telephone: Eastbourne 26788 between 9.0 and 10.0 a.m.
Kent and Sussex Hospital, Out-patients Department, Tunbridge Wells, Kent.	Every Thursday, 2.0 to 3.15 p.m and 6.0 to 7.30 p.m. By appointment only. Telephone: Tunbridge Wells 20853.
East Sussex and County Clinic, London Road, Bexhill-on-Sea.	Monday, 6.30 to 8.0 p.m By appointment only. Telephone: Cooden 3517 after 1.0 p.m.

The Family Planning Act, 1967, gives the Local Authority a general power to arrange for the giving of advice on contraception; to examine those seeking such advice and to supply contraceptive substances and appliances. The significance of the Act is that it extends existing powers by recognising need on social as well as medical grounds. Charges may be made in non-medical cases if the person can afford it.

(I) MARRIAGE GUIDANCE COUNCILS

Problems related to marital relationships.

Marriage Guidance Council Appointments Secretary, Telephone Bexhill 3380.

The Catholic Marriage Advisory Council, 84, Queen's Road, Brighton BN1 3XE (Telephone: Brighton 25261) serves Roman Catholics and others who may wish to make use of its services.

(J) EASTERN CO-ORDINATION COMMITTEE

This Committee is composed of representatives from National, Local Government and voluntary bodies, covering the Local Authority areas of the Boroughs of Rye and Bexhill and the Rural Districts of Battle and Hailsham, by arrangement with the Children's Department, East Sussex County Council.

It is concerned with the care of children in families where conditions may be adverse.

Your Medical Officer of Health is a member of this Committee which meets at Bexhill Town Hall.

GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH
(Continued)

(K) RYE AND DISTRICT COUNCIL FOR THE WELFARE OF THE ELDERLY

The Rye and District Council for the Welfare of the Elderly includes the Borough of Rye extending to Winchelsea, Winchelsea Beach, Rye Harbour, Camber, Playden, East Guldeford, Iden, Peasmarsh, Udimore, Rye Foreign, with representatives in each of these parishes.

They endeavour to co-ordinate all the voluntary agencies connected with the welfare of the elderly in those areas which include Women's Royal Voluntary Service, Toc H., Inner Wheel, B.P Guild, Rotary, Rye Boy Scouts and the voluntary projects of the Thomas Peacocke School pupils as organised by the Headmaster.

Herewith short list of services offered by this organisation:-

1. Emergency Hospital Visiting Service.
2. Chiropody Service.
3. Gardening.
4. Visiting.
5. Mending
6. Small home repairs.
7. Home Decorating.
8. Shopping.
9. Wood Chopping (Kindling).
10. Help with filling in forms.
11. Snow Clearance.

Further information may be obtained from the Health Visitors of the Borough.

(L) WORK CENTRE FOR THE ELDERLY, RYE

Opened in October, 1968, giving an outside interest to about 16 elderly citizens who attend each morning from 9.45 to 11.45 a.m in a room kindly provided by the Rye St.John Ambulance Association.

It is a tribute to those voluntary workers behind the scenes that this much appreciated venture has proved to be such a valuable and happy social amenity.

(M) MEALS ON WHEELS

The Women's Royal Voluntary Service supplied 1,983 meals (of which 1,266 ranked for subsidy) to the elderly in the Borough of Rye during 1968.

The basic charge to recipients is 1/6d per meal, the cost price being 2/6d. A subsidy of 1/- per meal was granted by this Local Authority.

Transport is subsidised by the Welfare Department of the East Sussex County Council.

These meals are an insurance against malnutrition, subsequent hospitalisation and institutionalism.

FOOD HYGIENE

	1965	1966	1967	1968
Total number of food premises in Borough.. ..	102	103	103	103
Number fully inspected	72	87	96	100
Number of informal notices served	3	3	6	9
Notices complied with by the end of year.. ..	3	3	6	9

Washing up in the kitchen can be a simple hygienic task when using hot water and modern detergents in their correct dosages, the only equipment necessary being a plate rack of suitable dimensions. Where this fails is in the persons of the houseproud housewife who looks upon a filled plate rack as so much clutter and also has an itch to wipe in order to give the plates an added "sparkle" and clear the decks as quickly as possible.

She is quite oblivious that the tea towel she so gaily uses is contaminating otherwise clean crockery. Recent investigation of the bacterial content of tea towels in daily use have shown them to be carrying literally millions of potentially harmful organisms, although not apparently dirty to the naked eye. Laundering will disinfect them but in a very short time they will become foci of infection.

Even with the introduction of the washing up machine, the final polish with a tea towel is still practised, this sequence can only be broken by continuing education beginning in the formative years in school domestic science kitchens.

The following is a comprehensive list of purveyors of food in the Borough:-

Shops classified according to their main trades:-

Grocers and General Provisions..	15
Butchers	5
Fishmongers	3
Greengrocers	4
Confectionery and sweets	5
Cafes with cake shops	7
Shops selling milk..	12
Bakehouses	4
Licensed premises (hotels and inns)..	18
Hotels, Guest Houses and Cafes	19
Canteens (industrial, etc)	5
Schools:	
Infants	1
Primary	1
Secondary Modern	1
Grammar	1
Private	2
	103

FOOD HYGIENE (Continued)

Ice Cream

There are 34 premises registered under Section 16 of the Food and Drugs Act, 1955, for the sale of ice cream, which is all sold pre-packed.

Inspections of Registered Food Premises

There were 217 inspections of registered food premises during 1968.

GAME ACT, 1831

Three persons were licensed to deal in Game during the year 1968.

THE CENTRAL ABATTOIR, JUNCTION ROAD, ST.LEONARDS-ON-SEA

This is jointly owned and administered by the Borough of Rye and three neighbouring Authorities (Hastings County Borough, the Borough of Bexhill and Battle Rural District Council).

Average weekly throughput:-

Financial year ending 31.3.1968	Financial year ending 31.3.1969
301 units	332 units

EXAMINATION OF MEAT AND OTHER FOODS

The following food was inspected during the year and certified as unfit for human consumption:-

	Stones	Lbs	Ozs
Fresh Meat..	16	2	0
Canned meat	11	2	0
Canned fruit	12	1	0
Canned fish	1	0	2

DOGS IN FOOD SHOPS, RESTAURANTS AND OTHER FOOD PREMISES

Regulations 8 and 33 of the Food Hygiene (General) Regulations, 1960, oblige food traders to "take all such steps as may be reasonably necessary to protect the food from risk of contamination" and in particular not to place food so as "to involve any risk of contamination", which obviously includes pollution by dogs.

A notice to this effect, signed by me, has been available to all food traders for prominent display in their premises for the past 18 years; distributed by the Public Health Inspector in the course of his inspections of food premises.

In October, 1968, as a further encouragement and reminder, all food traders in the Borough were sent a personal letter advising each one of the availability of these notices and free replacement if unsightly or mislaid.

There was an immediate and most encouraging response within

DOGS IN FOOD SHOPS, RESTAURANTS AND OTHER FOOD PREMISES
(Continued)

the space of a few weeks. It is estimated that 75% of the food traders in the Borough are now displaying notices.

FOOD AND DRUGS ACT, 1955

BRUCELLOSIS

Although painfully slow in its progression, it is noted that the Brucellosis (Accredited Herds) Schome had up to the end of January, 1969, accepted 2,954 herds as being accredited. This represents 1.6% of the total number of herds in England and Wales and 3.9% of the eligible cattle.

There is still a continuing loss both in health, capital and income, albeit a welcome slightly reduced occupational health risk. It is hoped that the pace will quicken in the near future and that the Ministry will not leave the decision to eradicate wholly with public-spirited and farseeing farmers. Financial props would increase the tempo.

Milk Supplies - Brucella Abortus

(i) Number of samples of raw milk examined.. .. 8
(ii) Number of positive samples found .. .. .. Nil
(iii) Action taken in respect of positive samples Nil

All were satisfactory for penicillin content and negative for M. tuberculosis.

WATER SUPPLY

Hastings Corporation Water Undertaking supplies main water to the Borough of Rye.

All water is treated and chlorinated; a high standard of purity and adequate quantity was maintained throughout the year.

Bacteriological reports on the treated water were made available to this Authority, all of which were satisfactory.

Plumbo-solvency

None of the water supplied to this Borough is plumbo-solvent.

Fluoride content

The fluoride content was found to be 0.1 parts per million, falling far below the optimum level of 1 p.p.m which is advised by leading authorities as being necessary to prevent the decay of teeth in young children.

I have no doubt regarding either its safety or its efficacy and hope that delaying tactics by outside bodies will cease, thus allowing implementation.

This Authority is to be congratulated on its far-sighted policy in pursuance of community health in its recommendation to the Statutory Water Undertaking to fluoridate its water supply.

No public health measure has been the subject of such careful and meticulous research prior to being introduced to the public.

DUNGENESS NUCLEAR POWER STATION, ENVIRONMENTAL MONITORING

Reports were received at regular intervals covering the period from January to December, 1968.

The following comments were extracted:-

The levels of radioactivity in fish and shellfish and gamma radiation dose rates on the beach are not significantly different from the already very low levels found previously. These are due entirely to background radioactivity and none is attributable to the operation of the station.

The levels of strontium 90 in the milk sampled in the two zones were all substantially the same as those which are found in comparable parts of the country where there are no nuclear power stations.

The Departments responsible for controlling discharges of radio-active waste and direct radiation from the station consider that the position shown in this report is satisfactory.

SEWERAGE AND SEWAGE DISPOSAL

During the year effluents remained consistently good; the freedom from pollution of the river channel through the town has contributed noticeably to the raising of amenity and health standards.

The works and pumping stations have remained in the capable control of Mr.Rook; the loss of Mr.Finch during the year was a blow but we have been exceedingly fortunate in his replacement.

The clearing of sludge beds still presents a problem.

REFUSE COLLECTION

A full weekly collection service was maintained in 1968.

The new vehicle became operative during the year, giving a much-improved standard of collection; appreciated by the general public and, incidentally, the operators.

Further work has been carried out on the tipping area leading to more control and better covering and levelling.

Continuing improvement works have been carried out on the tip road.

CIVIC AMENITIES ACT, 1967

This Act makes it an offence to abandon a motor vehicle and imposes a duty on local authorities to remove abandoned vehicles and to make provision for owners to leave unwanted vehicles in specified places. There is also an obligation to provide places where householders may leave unwanted articles and rubbish.

The Council provides a free disposal service for old motor cars.

Old cars are collected by a car breaker paid by the Council, and during 1968, 7 abandoned cars were dealt with in this way.

PUBLIC CONVENIENCES

By arrangement with the Bus Company, part of the waiting room in Station Approach was taken over and converted into a ladies toilet with washing facilities, a much needed added amenity.

PUBLIC CONVENIENCES
(Continued)

Toilets, urinals and washing facilities are also provided at:-

Tower Street
The Strand
Cricket Salts

Toilets and urinals without washing facilities are provided at The Gun Garden.

ACTION UNDER PUBLIC HEALTH AND HOUSING ACTS

The following information is in accordance with the requirements of the Ministry of Health:-

1. Inspection of dwellinghouses during the year

(i) (a) Total number of dwellinghouses inspected for housing defects (under the Public Health or Housing Acts).. 14

(b) Number of Inspections made for this purpose 52

(ii) (a) Number of dwellings (included under subhead (i) above) which were inspected and recorded under the Housing Consolidated Regulations, 1926 and 1932 .. .. Nil

(b) Number of inspections made for this purpose .. .. Nil

(iii) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation.. .. .. Nil

(iv) Number of dwellinghouses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation.. 3

2. Remedy of Defects during the year without service of Formal Notice

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers 5

3. Action under Statutory Powers during the year

(A) Proceedings under Sections 9, 10 & 12 of the Housing Act, 1957:-

(i) Number of dwellinghouses in respect of which notices were served requiring repairs .. .. .. Nil

(ii) Number of dwellinghouses which were rendered fit after service of Formal Notices:-

(a) By owners. .. .. Nil
(b) By Local Authority in default of owners .. Nil

(iii) Number of dwellinghouses acquired and subsequently rendered fit by the Local Authority .. .. Nil

(B) Proceedings under the Public Health Acts:-

(i) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied .. .. Nil

(ii) Number of dwellinghouses in which defects were remedied after service of Formal Notices:-

(a) By owners .. .. Nil
(b) By Local Authority in default of owners .. Nil

ACTION UNDER PUBLIC HEALTH AND HOUSING ACTS (Continued)

(C) Proceedings under Sections 16 and 17 of the Housing Act, 1957:-

(i) Number of representations, etc., made in respect of dwellinghouses unfit for habitation.. .. .. Nil

(ii) Number of dwellinghouses in respect of which Demolition Orders were made .. .. Nil

(iii) Number of dwellinghouses demolished in pursuance of Demolition Orders .. .. Nil

(iv) Number of dwellinghouses in respect of which undertakings were accepted from owners:-

(a) to render the house fit for habitation.. .. Nil
(b) usage other than for human habitation .. .. Nil

(v) Closing Orders under the Housing Act, 1957 .. .. Nil

(vi) Number of dwellinghouses dealt with under the Housing Act, 1957, Section 17(3) .. .. Nil

(D) Proceedings under Section 18 of the Housing Act, 1957.. Nil

HOUSING: LOCAL AUTHORITY AND PRIVATE

New Dwellings

New dwellings erected during 1968:-

(a) By the Council .. .. Nil
(b) By private enterprise 12

Private enterprise dwellings in course of erection at 31st December, 1968 27

Accommodation under the letting control of the Council as at 31st December, 1968:-

Assisted Schemes - Pre-war houses 115

Assisted Schemes - Post-war houses and flats 420

Expired leases - Pre-1914 houses 26

561

Applicants on Council's Housing List at 31st December, 1968 143

Applicants on Council Housing List for Elderly Persons' dwellings 17

COMPARATIVE TABLE - PRIVATE ENTERPRISE AND LOCAL AUTHORITY

Year	Private Enterprise		Local Authority
	New dwellings	Conversions	New dwellings
1960	2	-	-
1961	2	2	-
1962	2	-	38
1963	1	2	-
1964	7	-	-
1965	9	1	9
1966	12	2	51
1967	47	-	-
1968	12	4	-

HOUSING

HOUSING ACTS, 1958-1964 IMPROVEMENT GRANTS

Discretionary Grants are given at the discretion of the local council whereby up to half the estimated cost of a wide range of improvements may be paid, subject to a maximum grant of £400. Grants of up to £500 per flat are payable for converting houses of three or more storeys into self-contained flats.

Discretionary Grants

Applications received..	2
Properties approved for grants	2
Applications refused (not eligible) ..	-

Analysis of the 2 approved properties:

Owner/occupied: 2 Tenanted: 0

Total amount of Discretionary grants approved in 1968..	£1,460. 0. 0d
Average grant per dwelling	£365. 0. 0d
Number of applications approved and completed in 1968	Nil
Number of applications approved in previous years and completed in 1968..	Nil

Standard Grants enable house owners and certain leaseholders to obtain grants, as a right, if the necessary conditions apply, of up to £155 to provide five basic amenities of bath or shower in a bathroom (or an addition or by the conversion of an outbuilding), wash-hand basin, a water closet (with septic tank drainage if no sewer is available), hot and cold water supply (bringing a piped water supply into a house for the first time), and a satisfactory food store.

The additional items in parentheses were introduced under the Housing Act, 1964, and may increase a standard grant up to a maximum of £350.

Standard Grants

Applications received..	5
Properties approved for grants ..	5
Total amount of Standard grants approved in 1968	£1,018

Five properties were provided with the following amenities at a total cost of £1,120. Number where advantage taken of increased grant: 2.

Baths or showers in bathrooms.. ..	5
Wash-hand basins	4
Hot water systems..	5
Water closets..	3
Food stores	4

It will be appreciated that the total amount of grants paid in the current year must, of necessity, relate partly to grants made in previous years, the works having been completed in the year 1968.

Grants are a helpful incentive to the improvement of existing housing.

VISITS OF THE PUBLIC HEALTH INSPECTOR DURING 1968

Council houses - defects remedied..	891
Private houses re defects..	29
Food premises..	340
Streams and ditches	22
Infectious diseases	4
Insects and pests	35
Smoke and fume nuisances	24
Offices, Shops and Railway Premises	40

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

This Act makes provision for the health, welfare and safety of persons employed in offices, shops and certain railway premises.

At the end of 1968 the numbers of premises registered under this Act were:-

Offices..	32
Retail shops	70
Warehouses, wholesale shops	7
Catering establishments open to the public, canteens	9
Fuel storage depots.. ..	Nil

FACTORIES ACT, 1961

Inspections for purposes of provisions as to health

Premises	No. on Register	Inspections	Notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	9	28	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	43	26	-	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	-	-	-	-
Totals	52	54	-	-

FACTORIES ACT, 1961
(Continued)

Particulars	Number of Cases in which defects were found				Number Cases in Which Prosecutions Were Instituted
	Found	Remedied	Referred		
			To H. M Inspector	By H. M. Inspector	
Want of cleanliness	1	1	-	-	-
Overcrowding	-	-	-	-	-
Unreasonable temperature	-	-	-	-	-
Inadequate ventilation	-	-	-	-	-
Ineffective drainage of floors	-	-	-	-	-
Sanitary Conveniences: (a) insufficient	-	-	-	-	-
(b) Unsuitable or defective	2	2	-	-	-
(c) not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	-	-	-	-	-
Totals	3	3	-	-	-

(Outwork Sections 133 and 134)

Nature of Work	No. of outworkers in August list required by Section 133(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel: Making, etc	-	-	-	-	-	-
Cleaning and washing	-	-	-	-	-	-

INDUSTRIES

The numbers engaged in the main industries located in the Borough are given below:-

	As at 31st December, 1968			As at 31st December, 1967
	Male	Female	Total	Total
Aerated water manufacturers.. ..	7	2	9	9
Bedding makers	2	-	2	2
Builders	139	1	140	100
Catering and bakeries	11	41	52	61
Cattle market	-	-	-	1
Cinema	4	6	10	12
Coal merchants	9	1	10	10
Corn chandlers	13	2	15	15
Dairymen	15	9	24	26
Engineering works	312	46	265	304
Furniture removers	12	2	14	14
Hotels	21	26	47	24
Laundries	17	38	55	56
Nurserymen	-	-	-	1
Pottery works	11	28	39	37
Printing works	13	18	31	31
Ship repairing	20	-	20	17
Toy manufacturers	14	76	90	90
Transport undertakings	69	3	72	78

Mass Miniature Radiography in Industry

A completely mobile, self-contained Mass X-ray Unit is available to visit any premises employing 100 persons or more in the East Sussex area. The only facility required is a parking site for two vehicles.

Over 100 people can be given free chest X-ray examinations in a period of one hour and, as there is no undressing, both men and women are X-rayed at the same session. Arrangements can be made either by telephone to Brighton 66017 or by letter to the Director, East Sussex Mass Radiography Unit, 26, Ditchling Road, Brighton BN1 4SF.

It is emphasised that the Mass X-ray Service is free and that no information is disclosed without the patient's consent.

Rye Market

The numbers of live stock sold in Rye Market during 1966, 1967 and 1968 are indicative of the activity on Market days and the importance of this venue to farmers for buying and selling in the Romney Marsh area:-

	1966	1967	1968
Fat cattle	747	966	786
Fat sheep and lambs.. ..	41,636	45,460	43,694
Calves	303	381	388
Rams (tegs)..	310	346	237
Fat pigs	4,367	4,235	2,836

INDUSTRIES

Rye Market (Continued)

The Market is a focal point in the economic life of Rye and the surrounding farming area.

PORT OF RYE

	1966	1967	1968
Vessels registered at the Port of Rye	49	51	56
Foreign ships bringing cargoes of timber..	2	5	20
Coastal cargo arrivals..	-	2	7
Yachts from overseas (pleasure craft) using Rye berthing facilities	98	146	125
Vessels engaged in fishing between Bexhill and Dungeness, which make use of facilities in Rye	101	115	122

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Number of properties inspected in 1968:-

(a) as a result of complaint.. 73

(b) by survey 8

Number of properties found to be infested by rats or mice 59

Number of properties treated by Local Authority 59

Number of visits by Rodent Operative 207

The Council employ a contractor for all major infestation and preventive measures. Minor complaints are referred to our own part-time operator.

METEOROLOGY

RAINFALL FIGURES TAKEN IN RYE

Year	Number of days on which rain fell	Longest period of drought	Periods of drought
1961	97	30 days	3rd March-1st April inclusive
1962	104	15 days 20 days	11th-25th March inclusive. 5th-24th October inclusive.
1963	176	Nil	Nil
1964	89	25 days	1st-25th January inclusive.
1965	140	16 days	16th-31st October inclusive.
1966	158	17 days 16 days	4th-20th January inclusive. 26th May-10th June inclusive.
1967	141	15 days	29th June-13th July inclusive.
1968	138	Nil	Nil

The definition of Drought is 15 days without rain.

Comparison with previous years is given in the following table:-

Year	Total Rainfall
1961..	26.19 inches
1962..	24.46 inches
1963..	28.91 inches
1964..	26.95 inches
1965..	32.94 inches
1966..	36.87 inches
1967..	32.35 inches
1968..	27.85 inches

PHYSIOGLOGY

RAINFALL FIGURES TAKEN IN RYE

Year	Number of days on which rain fell	Longest period of drought	Periods of drought
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1963	176	Nil	Nil
1964	99	25 days	1st-25th January inclusive.
1965	140	16 days	16th-31st October inclusive.
1966	158	17 days 6 days	4th-20th January inclusive. 26th May-10th June inclusive.
1967	141	15 days	29th June-13th July inclusive.
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1966..	36.07 inches
1967..	32.39 inches
1968..	27.85 inches

LIVERPOOL SCHOOL OF HYGIENE AND TROPICAL MEDICINE
LIBRARY
- 2 MAR 1970